

**North Carolina Association of Rescue & E.M.S., Inc.**  
**CRAIG A. HELMS MEMORIAL TECHNICAL RESCUE CHALLENGE**  
**COMPETITION**

**ENTRY FORM**

**Greenville, North Carolina**  
**June 27, 2009**

***Please print or type***

Squad: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Phone #( \_\_\_\_\_ ) \_\_\_\_\_ Home Phone #( \_\_\_\_\_ ) \_\_\_\_\_

Team Captain's Name (please print): \_\_\_\_\_

**"We understand that this form must be postmarked by May 1 for our team to be eligible to compete."**

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\* ONLY TWO (2) MEMBERS ON A TEAM \*\*\***

***Please Print or type***

1. TEAM MEMBER: \_\_\_\_\_

2. TEAM MEMBER: \_\_\_\_\_

***Mail or Deliver Entry Form to:***

***N.C. Association of Rescue & EMS***  
**CRAIG A. HELMS MEMORIAL TECHNICAL RESCUE CHALLENGE**  
***PO Box 1914***  
***Goldsboro NC 27533-1914***